

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Henry Ross for Congress

ADDRESS (number and street)

PO Box 100

Check if different
than previously
reported. (ACC)

Eupora

MS

39744

2. FEC IDENTIFICATION NUMBER ▼

C

C00475988

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MS

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2015

through

M M / D D / Y Y Y Y
03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lauren Stewart

Signature of Treasurer

Lauren Stewart

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 15

Write or Type Committee Name

Henry Ross for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	84341.43	84341.43
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	84341.43	84341.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2466.11	2466.11
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2466.11	2466.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	81373.57	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	115911.42	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

Write or Type Committee Name

Henry Ross for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

7300.00

7300.00

(ii) Unitemized.....

1770.00

1770.00

(iii) TOTAL of contributions from individuals ▶

9070.00

9070.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

75271.43

75271.43

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

84341.43

84341.43

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

84341.43

84341.43

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2466.11	2466.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	200.00	200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2666.11	2666.11

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-301.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	84341.43
25. SUBTOTAL (add Line 23 and Line 24).....	84039.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2666.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	81373.57

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 15
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Henry Ross for Congress

Full Name (Last, First, Middle Initial) Ruth T. Berry		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2015
Mailing Address 2101 Bluecutt Rd		Transaction ID : SA11AI.5621
City Columbus	State MS	
Zip Code 39705		Amount of Each Receipt this Period 1000.00 Individual Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Furniture Manufacturer	
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Mrs Carol Boggess		Date of Receipt M M / D D / Y Y Y Y Y 03 / 04 / 2015
Mailing Address 607 3rd St. S		Transaction ID : SA11AI.5609
City Columbus	State MS	
Zip Code 39701		Amount of Each Receipt this Period 250.00 Individual contribution
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Housewife	
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Susan A Carleson		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2015
Mailing Address 175 Cameron Station Blvd.		Transaction ID : SA11AI.5620
City Alexandria	State VA	
Zip Code 22304-7783		Amount of Each Receipt this Period 500.00 Individual Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer ACRU	Occupation Executive Officer	
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Henry Ross for Congress

Full Name (Last, First, Middle Initial)

Rhonnie Cummins

Mailing Address 33 CR 311

City

Oxford

State

MS

Zip Code

38655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Builder

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11AI.5623

Amount of Each Receipt this Period

500.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Hugh Gibson

Mailing Address P. O. Drawer G

City

Eupora

State

MS

Zip Code

39744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Attorney

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5635

Amount of Each Receipt this Period

300.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Betty Gillis

Mailing Address P. O. Box 5355

City

Columbus

State

MS

Zip Code

39704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Manager

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period

500.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Henry Ross for Congress

Full Name (Last, First, Middle Initial)

Phillip Griffin**A.**

Mailing Address P. O. Box 1124

City

Starkville

State

MS

Zip Code

39744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Griffin Strategies, LLCOccupation
Political Strategist

Receipt For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11AI.5611

Amount of Each Receipt this Period

250.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Eugene Imes**B.**

Mailing Address 1523 - 9th St

City

Columbus

State

MS

Zip Code

39701

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Investments

Receipt For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5636

Amount of Each Receipt this Period

1000.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Buchanan Meek**C.**

Mailing Address PO Box 508

City

Eupora

State

MS

Zip Code

39744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employedOccupation
Attorney

Receipt For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5643

Amount of Each Receipt this Period

500.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Henry Ross for Congress

Full Name (Last, First, Middle Initial)

Thomas L. Minyard

A.

Mailing Address 1251 Green T South Drive

City

Hernando

State

MS

Zip Code

38632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barge, Waggoner, Sumner & Cann

Occupation

Civil Works Program Mgr.

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period

250.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Rose Ann Morrison

B.

Mailing Address 2617 Confederate Ave

City

Vicksburg

State

MS

Zip Code

39180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Import/Export Business

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11AI.5613

Amount of Each Receipt this Period

1000.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Bill Russell

C.

Mailing Address PO Boxes 9180

City

Columbus

State

MS

Zip Code

39705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Car dealer

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5637

Amount of Each Receipt this Period

250.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Henry Ross for Congress

Full Name (Last, First, Middle Initial)

Judy H Thompson

Mailing Address 375 Mt. Moriah Rd

City

Eupora

State

MS

Zip Code

39744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Secretary

Receipt For: 2015



Primary



General



Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5657

Amount of Each Receipt this Period

500.00

Individual Contribution

Full Name (Last, First, Middle Initial)

William H Yates

Mailing Address PO Box 111

City

Eupora

State

MS

Zip Code

39744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Meek Insurance

Occupation

Agent

Receipt For: 2015



Primary



General



Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.5642

Amount of Each Receipt this Period

500.00

Individual Contribution

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

7300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 15

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	---	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Henry Ross for Congress

A. Full Name (Last, First, Middle Initial) Henry Ross		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y Y Y	03		30		2015
M M	/	D D	/	Y Y Y Y Y Y									
03		30		2015									
Mailing Address PO Drawer B		Transaction ID : SA11D.5685											
City Eupora	State MS	Zip Code 39744	Amount of Each Receipt this Period <table border="1"> <tr> <td>271.43</td> </tr> </table>	271.43									
271.43													
FEC ID number of contributing federal political committee. C H0MS01050		Loan to campaign											
Name of Employer Self employed	Occupation Attorney												
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date <table border="1"> <tr> <td>271.43</td> </tr> </table>			271.43									
271.43													

B. Full Name (Last, First, Middle Initial) Henry Ross		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y Y Y	03		31		2015
M M	/	D D	/	Y Y Y Y Y Y									
03		31		2015									
Mailing Address PO Drawer B		Transaction ID : SA11D.5641											
City Eupora	State MS	Zip Code 39744	Amount of Each Receipt this Period <table border="1"> <tr> <td>75000.00</td> </tr> </table>	75000.00									
75000.00													
FEC ID number of contributing federal political committee. C H0MS01050		Loan to Campaign											
Name of Employer Self employed	Occupation Attorney												
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date <table border="1"> <tr> <td>75271.43</td> </tr> </table>			75271.43									
75271.43													

C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y Y Y					
M M	/	D D	/	Y Y Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>75271.43</td> </tr> </table>	75271.43
75271.43		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>75271.43</td> </tr> </table>	75271.43
75271.43		

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Henry Ross for Congress

Full Name (Last, First, Middle Initial)

A. Byzacksteen

Mailing Address 1119 Webster Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2015

City	State	Zip Code
Corinth	MS	38834

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
Website and hosting

004

Transaction ID : SB17.5663

Candidate Name

Henry Ross for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

State: MS District: 01

Full Name (Last, First, Middle Initial)

B. ProGraphics

Mailing Address P. O. Box 293

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

City	State	Zip Code
Columbus	MS	39703

Amount of Each Disbursement this Period

1844.68

Purpose of Disbursement
Cards

004

Transaction ID : SB17.5664

Candidate Name

Henry Ross for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

State: MS District: 01

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

2194.68

TOTAL This Period (last page this line number only).....

2194.68

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5164

Henry Ross for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Henry Ross for Congress

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Box 100

City

State

ZIP Code

Eupora

MS

39744

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

58000.00

0.00

58000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
12 30 / 2011M M / D D / Y Y Y Y
11/08/2012

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

58000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4408

Henry Ross for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Henry Ross

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Drawer B

City

State

ZIP Code

Eupora

MS

39744

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 31 /

Y 2010 Y Y

M M /

D D /

Y 09/30/10 Y Y

6.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.4408

(Current loan balance of 50000.00 has been forgiven)(A previous settlement of 50000.00 has been rescinded)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5544

Henry Ross for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Henry Ross

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Drawer B

City

State

ZIP Code

Eupora

MS

39744

Original Amount of Loan

10000.00

Cumulative Payment To Date

2088.58

Balance Outstanding at Close of This Period

7911.42

TERMS

Date Incurred

M / M / Y
03 / 07 / 2012

Date Due

M / M / Y
on Demand

Interest Rate

6.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7911.42

TOTALS This Period (last page in this line only)..... ►

115911.42

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.